



February 6, 2015

Dr. Karen DeSalvo  
Office of the National Coordinator for Health Information Technology  
U.S. Department of Health and Human Services  
Transmitted by:

RE: Federal Health IT Strategic Plan, 2015 – 2020

Dear Dr. DeSalvo,

On behalf of the Joint Public Health Informatics Taskforce (JPHIT), we are pleased to submit comments on the 2015 – 2020 Federal Health IT Strategic Plan. As a collaboration of nine national public health associations, JPHIT's comments are a broad perspective on federal actions that impact public health informatics policy and practice in the United States of America. We are enthusiastic and supportive of ONC's efforts to coordinate over thirty-five separate, federal departments and agencies to protect and improve our nation's health with electronic health information that meaningfully improve the entire population's health.

The Federal Health IT Strategic Plan recognizes the central role that public health agencies play across the goals of collecting, sharing, and using health information. Public health agencies are the front-line of national efforts to build electronic health data exchanges for population health. This is true in areas that are within and beyond the scope of meaningful use. Public health agencies generate, collect, use and disseminate data that are essential to outbreak detection, response and management, emergency preparedness and response, protecting school health, maintaining food and drug safety, conducting population based surveys (Behavioral Risk Factor Surveillance System) and in providing individuals and policy makers with vital information and statistics. Given the unique and cross-cutting role that public health agencies play in building the future envisioned in the Federal Health IT Strategic Plan, we believe the plan will be more useful with a clearer separation between "providers" and "public health entities".

For the Strategy to succeed it is imperative for the federal government to sustain and enhance cooperative efforts with national associations that build greater capacity for informatics at state, tribal, local, and territorial (STLT) levels. Key challenges include a paucity of informatics skills in the public health workforce, an absence of technical and practice standards for electronic public health information exchange, and financial barriers to acquiring and upgrading information systems. Workforce is critical. Health agencies are constantly challenged with limited resources to train, recruit, and retain staff with the skills necessary to



*JPHIT develops and implements a shared informatics framework and action agenda for public health agencies and their partners.*

facilitate information exchange and maintain necessary collaborations<sup>1</sup>. Given the increasing number of electronic data trading partners and exponentially greater volumes of information, public health agencies are experiencing an acute strain on technical and administrative functions. Building informatics workforce capacity will reinforce and boost public health's efforts to participate in national activities to develop public health data and exchange standards, as well as overcome fiscal constraints and IT procurement challenges.

JPHIT's comments are presented on the following pages. For your convenience, our comments are tabulated by strategic goal and organized by objective. Please contact Charlie Ishikawa, Executive Secretary to JPHIT with any questions at [cishikawa@jphit.org](mailto:cishikawa@jphit.org).

JPHIT appreciates the work and vision of ONC in convening federal agencies and partners to develop this Strategic Plan. We look forward to the plan's implementation across the federal government, and will support our federal and STLT partners in achieving its objectives and outcomes.

Sincerely,



Marcus Cheatham, PhD  
JPHIT Co-Chair, NACCHO representative



William D. Hacker, MD, FAAP, CPE  
JPHIT Co-Chair, ASTHO representative

cc/

- Charlie Ishikawa, Executive Secretary to JPHIT
- Jim Daniel, ONC Public Health Coordinator
- Chesley Richards, CDC Deputy Director, Office of Public Health Scientific Services

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<sup>1</sup> For example: According to NACCHO, local health department (LHD) capacity is in decline across the country. Collectively, 48,300 LHD jobs have been lost since 2008. In 2013 alone, 1,800 positions were eliminated through layoffs and 2,600 by attrition. Reference: National Association of County and City Health Officials. (2014). *Local Health Department Budget Cuts and Job Losses: Findings from the 2014 Forces of Change Survey*. Retrieved February 6th, 2015, from <http://www.naccho.org/topics/research/forcesofchange/>

## Comments on the 2015 – 2020 Federal Health IT Strategy

By: The Joint Public Health Informatics Taskforce

### Strategic Goal 1: Expand Adoption of Health IT

Comments	
	• None

#### *Objective 1A: Increase the adoption and effective use of health IT products, systems, and services*

Comments	<ul style="list-style-type: none"> <li>JPHIT supports efforts to increase the adoption and effective use of health IT systems and EHRs by healthcare providers, especially for public health purposes. The continued inclusion of public health objectives in meaningful use is paramount to the building robust health information exchanges among care providers and STLT public health agencies.</li> <li>Notably, current efforts to achieve meaningful use and to establish health information exchange (HIE) have contributed to increased demands for vital statistics data on the part of health care and HIE organizations. Birth certificate data has been requested in several jurisdictions to assist with identity resolution in early childhood. Death certificate information has also been requested for administrative purposes such as death clearance in health care master person indices. As a result, increasingly vital statistics agencies are seen not only as a consumer, but also as a source of health information, creating additional technical and policy challenges.</li> <li>To provide greater assurance that efforts aligned with Goal 1 adequately build data collection capacities for public health purposes, JPHIT suggests that ONC work with its federal partners to further support and incentivize the development and adoption of health information technologies for public health functions; e.g., contact tracing, countermeasure administration, etc.</li> </ul>
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#### *Objective 1B: Increase user and market confidence in the safety and safe use of health IT products, systems, and services*

Comments	None
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**Objective 1C: Advance a national communications infrastructure that supports health, safety, and care delivery.**

<b>Comments</b>	<ul style="list-style-type: none"> <li>JPHIT emphasizes the importance of this objective to promoting public health and reducing health inequalities, especially in rural and tribal health settings. Efforts to expand high-speed or broad-band Internet access to rural settings should be accelerated.</li> </ul>
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**Strategic Goal 2: Advance Secure and Interoperable Health Information**

<b>Comments</b>	None
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**Objective 2A: Enable individuals, providers, and public health entities to securely send, receive, find, and use electronic health information**

<b>Comments</b>	<ul style="list-style-type: none"> <li>JPHIT applauds the inclusion of public health entities in this objective. Public health agencies are on the front-line for population health management across STLT jurisdictional levels.</li> <li>Federal efforts that develop and promote the dissemination of tools and resources that aid public health agencies in building secure and interoperable information systems should be a focus for national coordination and continued investment.</li> </ul>
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**Objective 2B: Identify, prioritize, and advance technical standards to support secure and interoperable health information**

<b>Comments</b>	<ul style="list-style-type: none"> <li>JPHIT emphasizes the importance of technical standards advancement to public health. As the nation's healthcare system moves away from a disease-based model of care to a health-based, learning health system electronic data and information exchange standards will be increasingly critical for reliable and interoperable health IT.</li> <li>Federal programs to develop and maintain standards for public health have provided tremendous benefit. Examples of valuable interagency collaborations include: CDC and ONC collaborative work under S&amp;I, and the Nationwide Public Health Meaningful Use Community of Practice; and CDC, ONC, and NIST support of message mapping and implementation guide development for meaningful use.</li> <li>JPHIT encourages ONC and its federal agency partners to prioritize development and implementation of standards for birth and death certificates, and to provision resources their implementation by public health agencies.</li> </ul>
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**Objective 2C: Protect the privacy and security of health**

**Comments**

- Public health agencies are trusted stewards of personal health information. As threats to the security and integrity of information systems evolve, JPHIT urges ONC and its federal agency partners to continue and enhance efforts that ensure STLT agencies possess state-of-the-art tools and capacities to maintain cyber-security.

**Strategic Goal 3: Strengthen Care Delivery**

**Comments**

JPHIT emphasizes the importance of public health and public health information for advances on Goal 3. To strengthen care delivery, population health outcomes must be objectively measured and contextualized within a fully, holistic and complete public health system perspective.

**Objective 3A: Improve health care quality, access, and experience through safe, timely, effective, efficient, equitable, and person-centered care**

**Comments**

JPHIT notes that additional strategies to help achieve this objective include:

- Financial incentives and accountability metrics for standards adoption;
- Templates or models for data sharing;
- Promoting patient access to public health services data; and
- Patient checks of data accuracy or authenticity.

**Objective 3B: Support the delivery of high-value health care**

**Comments**

JPHIT notes that data on the price, availability, and quality of care are necessary to quantify high-value, as well as low-value, health care. The all-payer claims databases that many states now mandate are a critical resource for such insights, and should be promoted as a strategy for achieving this objective.

**Objective 3C: Improve clinical and community services and population health experience through safe, timely, effective, efficient, equitable, and person-centered care**

**Comments**

JPHIT notes that the vast majority of federal health IT resources are focused on improving a patient's clinical experience, although the vast majority of factors that impact population health reside outside of clinical settings. Population health is greater than the outcomes of a patient panel. To improve the health of the entire population, regardless of where individual patients receive their health care, federal efforts to build public health informatics infrastructure must be enhanced.

Additional strategies to advance this objective include:

- Promoting collaborations among public and private healthcare providers, and public health agencies to improve patient, family and community health outcomes;
- Promoting health IT data use in community efforts to coordinate and implement social programs for population health care.

#### Strategic Goal 4: Advance the Health and Well-Being of Individuals and Communities

##### Comments

JPHIT notes that public health agencies are longstanding partners in grass-root efforts to advance community and individual well-being. Public health agencies are the facilitators of community health change, and enhancing their capacity to use Health IT is key to unlocking its potential utility in advancing community health.

#### ***Objective 4A: Empower individual, family, and caregiver health management and engagement***

##### Comments

JPHIT notes that additional strategies to help advance this objective include:

- Promoting improvements in the accessibility of information on relevant governmental and social services
- Promoting technologies that support care providers and patients in quickly identifying health condition-related resources and services.

#### ***Objective 4B: Protect and promote public health and healthy, resilient communities***

##### Comments

JPHIT's comments across the Federal Health IT Strategy amount to the way federal agencies can advance this objective

#### Strategic Goal 5: Advance Research, Scientific Knowledge and Innovation

**Comments** None

#### ***Objective 5A: Increase access to and usability of high-quality electronic health information and services***

##### Comments

JPHIT encourages ONC and its federal agency partners to include STLT public health agencies as necessary collaborators and stakeholders in the strategies

outlined for this objective (5A). In order to advance the science and practice of disease surveillance, state and local public health entities must be able to share realistic, but de-identified public health datasets in line with state and federal statutes. Public health needs standardized guidance, tools and resources to make this happen. Furthermore, since nearly all states (or their private sector, non-profit partners), collect hospitalization data, and increasingly agencies are building all-payer claims databases, public health agencies are gatekeepers to a significant volume of health systems data.

**Objective 5B: Accelerate the development and commercialization of innovative technologies and solutions**

**Comments**

JPHIT notes that additional strategies for advancing this objective include:

- Establishing common requirements and consensus data standards for commercial technology solutions, specifically in the area of public health;
- Sustained funding to public health agencies for standards development, adoption and maintenance;
- Promoting inter-jurisdictional data sharing agreements and shared licensing agreements;
- Developing technologies and methods for small area data analysis and geographic visualizations that protect personal identities.

**Objective 5C: Invest, disseminate, and translate research on how health IT can improve health and care delivery**

**Comments**

JPHIT notes that the methods for presenting and displaying actionable health information for health decision-making are poorly understood. These decisions include those that are made by individuals, their families, policy makers, healthcare providers and payers. Information alone does not drive change, and data are insufficient for a health system transformation. Health information must be presented in ways that adjust for the human and social factors, beliefs and behaviors, which surround personal and organizational decision-making.